Form B 21 Official Form 21 (12/03)

UNITED STATES BANKRUPTCY COURT DISTRICT OF

STATEMENT OF SOCIAL SECURITY NUMBER(S)

I .Name of Debtor (enter Last, First. Middle):	
(Check the appropriate box and, if applica	ble, provide the required information.)
Debtor Social Security Number is:	
Debtor does not have a Social Secu	rity Number.
2.Name of Joint Debtor (enter Last, First, M	Middle):
(Check the appropriate box and, if applica	ble, provide the required information.)
Joint Debtor Social Security Number	er is:
Joint Debtor does not have a Social	Security Number.
I declare under penalty of perjury that the f	Foregoing is true and correct.
х	
Signature of Debtor	Date
XSignature of Joint Dobton	Data
Signature of Joint Debtor	Date

Penalty for making a false statement: Fine of up to \$250,000 or up to 5 years imprisonment or both. 18 U.S.C. §§ 152 and 3571.

^{*}Joint debtors must Provide information for both spouses.